Data Quality Strategy June 2007

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SSDC Data Quality strategy

1. Introduction

Recent years have seen the growing emphasis that is placed by the Audit Commission on comparative performance of Local Authorities based on service and financial data. A key factor affecting the validity of these comparisons is the quality of data that is held by the authorities. Hence the Audit Commission, in the last year, has focused its attention on the level of compliance with 'data quality' standards. This is a further advancement from the previous activity of monitoring and sample testing of data held by authorities. It involves the audit of systems and processes that are used to store and retrieve data including the availability of adequate skills for its usage and development of guidance surrounding data quality.

Thus an ongoing challenge for any local authority is to ensure that the quality of data that is used in decision making processes, monitoring performance and policy formulation is of a high standard. SSDC has therefore developed a data quality strategy that aims to:

- 1. Provide a framework of data quality concepts.
- 2. Specify a data governance model to manage the oversight of data quality, incorporating data ownership and accountability.
- 3. Formalize the approach for identifying, documenting, and validating data quality

The above refers to Best Value performance indicator data and any other data that is held by the authority.

Vision

2.

Data is the bedrock upon which we build policies and make operational decisions about services. The integrity of the Council is therefore directly related to data quality; from first capture, through handling to analysis and communication. We are committed to continuous improvement in its management within the organisation and in our partnership with others.

3. Data Quality Framework

The Data Quality Framework (DQF) has been introduced to provide a common understanding of data quality for all users. It is structured to deliver the five dimensions of quality: accuracy, timeliness, comparability, usability and relevance.

3.1 Dimensions of Data Quality

- Accuracy how well information within a database reflects what was supposed to be collected.
- *Timeliness* examines whether the data is relevant to time periods and up to date
- *Comparability* refers to the extent to which datasets are comparable with other similar datasets
- Usability describes how easily the storage and documentation of data allows one access to make intelligent use of the data.
- *Relevance* incorporates all of the above dimensions to some degree, but focuses specifically on value and adaptability.

4. Governance and Leadership

The Council has ensured that there is top level commitment to DQ and therefore the overall responsibility for DQ rests with the Council's Corporate Governance group which is chaired by the Chief Executive and comprises of the Council's Monitoring and Chief Financial officers as well as the Head of the Audit Partnership. The Assistant Chief Executive is responsible for the strategy and guidance related to DQ. Responsibility for day to day management of DQ lies with the SSDC Management Board. Hence members of Management Board have individual overarching responsibility of ensuring that performance and other data that is provided for services meets the 5 dimensions of DQ. Any misgivings regarding DQ are raised with the Council's Corporate Governance group for determination of appropriate action that needs to be taken.

The lead member for DQ issues is Leader of the Council. The importance of DQ is covered in all relevant training sessions for members. In the main these are training sessions for finance, performance management and scrutiny

Management of DQ is integrated into planning, monitoring and reporting processes in the organisation. The Council's Service and Financial Planning Framework sets the overarching planning cycle and minimum standards for strategic and risk management of services. Key performance measures are reported to Management Board, District Executive and Scrutiny. The Council's annual performance plan is presented to full Council by the Leader of the Council

All Performance indicators (National and local) are owned by the relevant Heads of Service who are responsible for maintaining the audit trail. Rigorous internal controls are in place. The Corporate performance team subject the data submitted by services to validity checks. In addition, annually the South West Audit Partnership audits the performance data before the publication of the Performance plan.

4.1. Other significant roles

- The Senior Performance Officer in the Performance team is responsible for quality checks and raising awareness about DQ
- Heads of Service are responsible for provision of data for internal and external publication and maintenance of the audit trail
- All staff need to ensure that the integrity of data is maintained at all times and guidance related to DQ is adhered to

4.2 Risk management

Risk associated with DQ will need to be managed as a key corporate risk. The Council needs to ensure adequate arrangements are in place to manage the consequences of DQ failures.

4.3 Monitoring and review

This Strategy and the Council's overall approach to data quality is monitored by the Corporate Governance Group. The Assistant Chief Executive will ensure that the Council's strategy is aligned with Audit Commission guidance. South West Audit Partnership will provide internal assurance controls.

The council will assist the Audit Commission as far as it can to ensure that audits provide the baseline information to allow this Strategy to be reviewed.

5. Systems and Approaches

The Council will ensure that there are adequate systems in place for identifying, documenting and validating data quality. There are processes in place for the collection, recording, analysis and reporting of the data used to monitor performance. Staff are supported in their use of these systems by the specialist performance team.

5.1 Validation

A formal validating system involving an iterative cycle of ongoing assessment of data quality is in place, Guidance for Quality Assurance of PI data is shown in *Appendix 1*. Performance information is subject to a series of checks before it is released. Heads of Service will initiate the process of scrutiny after which data is submitted to the performance team. This is quality checked by the performance team. Quality checks are made by exception (as used by Audit Commission) ie where significant change is evident or in response to issues raised during audit by others. It is then presented to Management Board for the final sign off before it is reported to members.

Whilst verification is needed in all cases, the approach may differ depending on the complexity of the origin/ source of data. Simple verification exercises would involve a review of recent data against expectations or history, or a reconciliation of systems produced data with manual input records. However in other cases, it might be necessary to undertake more thorough verification tasks, such as:

- data cleansing, eg to remove duplicate or spurious records
- sample checks to eliminate reoccurrence of a specific error, eg formulae used in calculations
- test run of report output, to check the integrity of the query being used to extract data; and
- audit trail checks to ensure the integrity of the source

Any unresolved issues as a result of the above validation checks to be presented to the Corporate Governance group.

5.2 Audit Trails for PI Compilation

Guidance on completion of audit trails for all data owners is provided by the Performance team. *Appendix 2* shows the corporate template used by services. This includes a separate spreadsheet for target setting for subsequent 3 years shown in *Appendix 3*

5.3 Data Sharing Protocol

The council has a data sharing protocol in place. This is a formal set of quality requirements that is applied to all data used by the organisation which is shared externally, or which is provided by a third-party organisation. This data sharing protocol is shown in *Appendix 4*.

5.4 Voluntary Sector Data

The Voluntary Sector Co-ordinator is responsible for the integrity of data received from voluntary groups for the purpose of monitoring service level agreements that are held with them. This is done at the time of returns through quality checks as appropriate.

6. People and skills

The Council has arrangements in place to ensure that staff with data quality responsibility have the necessary skills to ensure the effective collection, recording, analysis and reporting of data.

Data quality issues are covered in relevant training sessions for officers and members. Training for users is provided on all databases where data is shared across the organization and also for those where data is shared with partners and external organizations. See *Appendix 5* for detail. The Corporate performance, Risk management and Finance teams provide support and guidance to officers and members.

The responsibility for delivery of accurate information is implicit, where applicable, within the job descriptions. The ability of staff to fulfill their job descriptions is judged at individual performance appraisals.

7. Learning

The Council recognises that data quality is the key to making informed strategic and operational decisions and the expected benefits of improved information can only be achieved through a continuous cycle of learning and improvement. Lessons learnt as a result of quality checks are used to amend processes and guidance. In addition audits carried out by the Audit Commission will be used to inform future plans. The Action plan shown in *Appendix 6* is based on recommendations from the Audit Commission as a result of audit work that has been undertaken.

APPENDICES

Appendix 1- Guidance for Quality Assurance of PI data

Guidance Note

Quality Assurance of Performance indicator data

1. Introduction

This guidance note has been produced to support staff understanding of the quality assurance arrangements in place to ensure accuracy of performance indicator information published within the annual performance plan.

2. <u>National Requirements</u>

Local Authorities are required to publish annually in their performance plans all Best Value Performance Indicators, other nationally specified indicators and Local performance Indicators. The data published will continue to play a key role in the future refreshment of the Council's Comprehensive Performance Assessment (CPA) score. Reserved indicators (indicators that the External Auditors have no confidence in the data or the systems where the data is derived from) are automatically placed in the bottom quartile.

3. Audit Commission Requirements

During the statutory Best Value audit, usually conducted between the months of July and September, the External Auditor will be looking for evidence that the performance indicator information published in the performance plan is accurate.

The remainder of this note gives some advice on the arrangements the Council has in place.

4. Quality Assurance Arrangements

a) Quality Assurance Process

It is essential that the quality assurance arrangements for performance indicators at both service and corporate level focus on

- Data quality checks
- Any calculations based on a high degree of manual interaction e.g. transferring data from paper based or core systems into spreadsheets or databases to perform PI calculations
- Cross checking data to ensure it is categorised correctly and matches source documents e.g. invoices, service related forms, applications
- Evidencing audit trails

PI Assessments - these will need to be conducted by service areas essentially on <u>all</u> their PIs to eliminate possible errors in the collation of PIs and so that any significant and/or unexpected variances can be identified and resolved. As a minimum, assessments will need to be conducted on PIs matching the following criteria:

- CPA BVPIs identified as high risk by the Audit Commission
- PIs in the scheduled of reservations from the audit of the previous performance plan
- New and amended PIs
- Pls exhibiting a variance (-/+ 5%)
- Ensuring consistency between PI data provided for the Performance Plan, Corporate plan, Service plans and LAA targets

These assessments should be conducted ideally for each quarter . Results of assessments should be incorporated in the quarterly reports.

Year End Audits – these will be carried out by the Performance team with support from services between the months of April and May. The purpose of these audits is to ensure:

- The PIs actual data is accurate
- The PIs are calculated in accordance with the relevant guidance
- Any estimation procedures are reasonable
- Sufficient supporting documentation is available to support their compilation
- Targets set are in line with those in other statutory plans and there are details of targets that have been set nationally

Year End Working / Supporting Paper Quality Checks – As part of the auditing process we need to ensure that accurate working and supporting papers are readily available to the auditors on request. Heads of Service need to ensure that all working papers for compilation of performance indicator data are available for the External Auditors. Prior to external audit by the Audit Commission, the South west Audit partnership will be conducting additional quality checks in June to ensure that all the relevant working and supporting papers are provided and comply with the Audit Commission's requirements.

The table below highlights the ideal timetable for quality assurance process

Month	Task
April	PT Year End Assessments
May	Internal Audit checks
June	BVPP published
July/ August	Audit Commission Audit of Performance Indicators
July	Q 1 PI Assessments
October	Q2 Assessments
December	Q3 PI Assessments
March	Q4 PI Assessments

b) Roles and Responsibilities

Role	Responsibilities
Performance Indicator owner (Head of Service)	Each performance indicator will have Head of Service (PI owner) identified who will be the first point of contact for the auditor regarding any queries relating to the published outturn figure. This person will have overall responsibility for the performance indicator. The PI owner should have sufficient knowledge of the indicator and ensure that the indicator is being calculated correctly, calculated according to the correct definition and that all working papers (audit trail) supporting the performance data are maintained. The PI owner will be responsible for carrying out regular data quality assurance to ensure that the PI is based on accurate, robust and consistent data. The PI owner will also be responsible for providing PI data on a quarterly basis to the programme area co-ordinator for reporting purposes.
Performance Indicator owner (stand by)	Each performance indicator should ideally have a nominated officer who would have the same responsibility as the PI owner. This officer would only be required to fulfil this role in the absence of the PI owner.
Performance Team	 PTeam have a key role in terms of performance information and quality assurance. Key responsibilities include: Ensuring formal guidance on PIs is condensed and disseminated, understood, and complied with in programme areas Developing guidance in relation to reporting, estimating, and calculating PIs Developing standard pro-formas to be used for collecting and recording PI data ie audit trails Actively tracking progress of action plans and recovery plans relating to specific PIs Independently conduct year end audits during April and May The Pteam will undertake benchmarking and research exercises to ensure that best practice exhibited by other councils or organisations is used to continuously improve the quality assurance process.
Internal Audit	Internal Audit has a responsibility in accordance with their annual internal

Role	Responsibilities
	audit to independently conduct audits and quality assure selected PIs.
	This role will include High risk audits on PIs meeting the following criteria;
	 BVPIs identified as high risk by the Audit Commission
	 PIs in the scheduled of reservations from the audit of the previous
	performance plan
	 New and amended PIs
	 PIs exhibiting a variance (-/+ 5%)
	 Ensuring consistency between PI data provided for the Performance
	Plan, Corporate plan, Service plans and LAA targets.
	The findings of audits will be reported to the relevant officers/bodies
	charged with the governance of the PIs ie Heads of Service and
	Management Board.

5. Audit trails

Service areas will be provided with the audit trail template. This form collects year end information. This includes a separate spreadsheet listing all PIs for an officer requesting target setting information for the subsequent 3 years. This is shown in *Appendix 3*. One form should be completed for each performance indicator which is included in the Performance Plan.

In order to fulfil audit requirements it is essential that all sections of the form are completed. Along with the completed forms it is essential, for audit purposes, that supporting evidence is provided.

Completed forms and supporting documentation for all programme areas must be kept in a file by the Head of Service and made available on request to the Performance Team and the auditors.

Appendix 2 - Corporate template for PI Compilation

PERFORMANCE INDICATORS

Summary Proforma for 2006/2007

PI Ref Number	Performance Indicator Description
BV109A	Percentage of major applications determined within 13 weeks.

Key Contact for queries on this PI

Name	Head of Service Name
Job Title	Head of
Current provider	
Location	Brympton Way
Telephone Extension	

Performance Information and Comparison with Previous Year

Last Year	This Year target 2006/07	This Year	% change from last yr to this
Outturn 2005/06		Outturn 2006/07	yr *
eg. 37%	eg. 57%		

If % change from last year to this year is significant, (eg. +/- 5%) please provide a brief explanation of the causes of this. Where possible please supply supporting evidence to support your explanation.

Calculation of the 2006/07 Performance Indicator

Please set out clearly how the PI has been calculated (show all your workings, and relate this back to the Definition

Please continue on a separate sheet, if necessary.

Where your workings relate to forms or other supporting evidence, **please attach copies of the relevant pages highlighting the figures you have used.** If a large report is used, just attach the summary sheet or final page with the relevant figure for the moment.

What systems did you use to get the information to compile the performance indicator?

This could be used as a permanent note, which would only need to be changed if the PI itself changed.

Please continue on a separate sheet, if necessary.

Your notes should address these questions:

- Did you use computerised records or manual systems?
- Was there a continuous process of data collection, or were samples used?
- Where data has been taken from forms and returns, what is the basis for the information disclosed on the forms?
- If internal management information is used, what steps have been taken to ensure the accuracy of the information?
- If you have used estimates, what are the basis for your calculations?
- Any other helpful information in support of your methodology?

CONFIRMATION BY OFFICER RESPONSIBLE FOR THE INDICATOR

I am satisfied that the indicators are (please mark "x"):

Reasonable	
Accurate	
Comply with the indicator description	
(see below)	
Derived from sound data collection and	
monitoring systems	
Fairly stated compared to the previous	
year	
Supported by good working papers	

Signature

Name Date

If the indicator does not comply with the Direction, please provide an explanation below.

BVPI Definition

Definition

All local planning authorities except county councils should use ODPM form PS2. Major applications are defined as rows 1-5.

For county councils, percentage of total planning decisions determined in 13 weeks as shown in the section giving details of all planning decisions made on ODPM form CPS1/2. Decisions where environmental assessments have taken place should be excluded from this calculation by county councils but not by other local authorities. County councils assess time for completion of all other applications within 13 weeks regardless of whether major or not.

The first day counts as day zero and is when the local authority receives the completed application and the correct fee and not when that application and fee are entered on the authority's system if that is later.

The notes to the PS2 state that 'Time spent in abeyance should be included in the total time taken (on no account should the clock be stopped) and the processing period must not be suspended awaiting amended plans nor restarted upon receipt of amended plans.'

Situations where the applicant withdraws a planning application because, for example, they have changed their mind about the development, should not be counted.

Cases where the decision goes to appeal: the clock stops on the date when the local authority issues a decision notice. Therefore the period of the appeal is not taken into account.

Formula

 $N = (a / b) \times 100$

Where:

a = number of major planning applications determined in 13 weeks

b = total number of major planning applications

Appendix 3- BVPI Target setting Summary Table 2006/7

As part of the Council's annual Best Value Performance Plan (BVPP) we are required to provide targets for each BVPI for the next 3 years. The attached document details those BVPI's for which you are responsible. Target information for 07/08 and 08/09 has been lifted from last years plan. Please check this is still correct and provide target data for 09/10. To assist with target setting, where available results for 06/07 have been included together with the quartile threshold results for all authorities for each BVPI.

In order to meet our deadline for publication please return this information to me by Wednesday 6th June.

DVD	DEFINITION OF INDICATOR	Outturn		Outturn	Target		Target	Target	Target	Quartile	Thresho
BVPI	DEFINITION OF INDICATOR	Results 2006/07		Results 2005/06	2006/07 hit ?	1	2007/8	2008/9	2009/10	Ave	06 Top
	ENVIRONMENT										
199a	The proportion of relevant land and highways as defined under EPA 1990 Part IV section 86 that is assessed as having combined deposits of litter and detritus across four categories of cleanliness	25.6%	♠	43%	30% or less	~	21%	18%	15%	15.3%	8.8%
199b	The proportion of relevant land and highways from which unacceptable levels of graffiti are visable	1.1%		2%	25%	~	1%	1%	1%	4.0%	1.0%
199c	The proportion of relevant land and highways from which unacceptable levels of fly-posting are visable	1.2%	✿	4%	25%	~	1%	1%	1%	1.0%	0.0%
199d	The year-on-year reduction in total number of incidents and increase in total number of enforcement actions taken to deal with 'fly-tipping'	4	**	n/a	n/a	n/a	n/a	n/a	n/a	Data	not publisl 2005-06
82a	(i) Total tonnage of household waste arisings – percentage recycled	27.02%		21.52%	40%*	\checkmark	45%*	45%*	45%*	17.62%	20.87%
	(ii) Total tonnage of household waste arisings sent for recycling	14009	♠	11578	18445*	\checkmark	20750*	21270*	21801*	16737	15126
82b	(i) Total tonnage of household waste arisings - percentage composted	18.69%		11.01%	*	\checkmark	*	*	*	8.95%	13.05%
	(ii) Total tonnage of household waste sent for composting or treatment by anaerobic digestion	9692	✿	5925	*	✓	*	*	*	9188	8770
84a	Kg of household waste collected per head	332.18		346.77	400	×	410	420	420	438.4	393.6
84b	Percentage change (from previous year) in kg of household waste collection per head of population	-4.21%		-6.80%	2.5%	~	2.5%	2.5%	2.5%	-1.0%	-3.7%
86	Cost of waste collection per household	£56.04	➡	£52.43	£54	x	£56	£58	£60	£47.71	£39.48
91a	Percentage of population served by a kerbside collection of recyclables	99.41%		96.24%	95%	✓	95%	95%	99%	94.6%	100.0%
91b	Percentage of households resident in the authority's area served by kerbside collection of at least two recyclables	99.41%	₽	96.24%	95%	~	95%	95%	99%	90.8%	100.0%
218a	Percentage of new abandoned vehicles investigated within 24 hours of notification	91%		90%	90%	\checkmark	94%	94%	94%	81.54%	96.64%
218b	Percentage of abandoned vehicles removed within 24 hours from the point at which the Authority is legally entitled to remove the vehicle	100%	 	100%	95%	~	100%	100%	100%	74.39%	95.0%

* recycling target is spread over both 82a and 82b

Appendix 4 – Information Sharing Protocol

SOMERSET DIRECT

INFORMATION SHARING PROTOCOL

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1. <u>Purpose</u>

- 1.1 This Protocol is an agreement between the Somerset Direct Partners, listed in Paragraph 6. The purposes of the protocol are:
 - to govern the sharing of information so that the Somerset Direct Partners can work together for the purposes of effective service delivery to customers in Somerset
 - to comply with the Data Protection Act 1998 (DPA), and the Human Rights Act 1998 (HRA), and
 - to inform enquirers why information about them may be shared, and how this sharing is managed.
- 1.2 Note that in relation to this Protocol, *information sharing* concerns the exchange of data between Partners, acting on behalf of each other, with the purpose of improving service to the customer. Here information sharing does not include processes, such as data matching, which attempt to uncover fraud.
- 1.3 The Partners recognise that the exchange of information about individuals, in line with statute, is fundamental to a multi-authority approach to service delivery.
- 1.4 The purpose of this information sharing is for one Partner to deliver services on behalf of another, which may involve processing personal data, with the aim of improving service to the customer.
- 1.5 This Protocol is primarily concerned with data concerning individuals normally resident within the boundaries of Somerset. It also applies to persons who live outside Somerset, who may come into contact with Partners.
- 1.6 This document should be read in conjunction with the Somerset Direct Information Policy and other complementary policies within each Partner Authority.

2. Introduction

- 2.1 The Somerset Direct Partners agree that:
 - a) The standards provide safeguards and a framework for the legal, secure and confidential sharing of information.
 - b) This Protocol is published, available to all residents of Somerset, to inform them why their information may be shared, and how the sharing is managed.
 - c) Partners will comply with the Data Protection Principles.
 - d) Partners will comply with Article 8 of the HRA. This states that "everyone has the right to respect for his private and family life, his home and his correspondence". This is a qualified right which can be overridden by a public authority on any of several grounds, including the prevention of disorder or crime.
 - e) This Protocol is to be reviewed annually.
 - f) Any Partner may request changes to the Protocol at any time by submitting suggested revisions to the County Solicitor, who will:
 - review the Protocol six months after initial agreement and annually thereafter
 - obtain agreement for any changes from Partners, and distribute codes of practice and guidance where appropriate.
- 2.2 Each Partner's Data Protection Officer is responsible for ensuring compliance with this Protocol.

3. Definitions

- 3.1 **Information Sharing** in relation to this Protocol, information sharing concerns the exchange of data between Partners, acting on behalf of each other, with the purpose of improving service to the customer. Here information sharing does not include processes, such as data matching, which attempt to uncover fraud.
- 3.2 **Personal data** data relating to a living individual who can be identified from the data, or from the data and other information which is in the possession of, or is likely to come into the possession of, the data controller. Personal data includes any expression of opinion or intentions in respect of the individual.
- **3.3** Sensitive personal data concerns a person's race or ethnic origin, political opinions, religious beliefs or beliefs of a similar nature, physical or mental health or condition, membership of trade unions, sexual orientation and criminal offences, proceedings and/or convictions.
- 3.4 **Data controller** a person or organisation which controls the purposes, contents and use of personal data.

Each Partner is a data controller for the personal data it processes.

3.5 **Data processor** - any person (other than an employee of the data controller) or organisation which processes data on behalf of the data controller.

Each Partner is acting as data processor for another Partner when processing data on its behalf.

3.6 **Consent -** the indication an individual freely gives to show his/her agreement to personal data relating to him/her being processed or shared.

4. <u>Standards</u>

4.1 Notification

Each Partner will have notified their processing of personal data to the Information Commissioner, as required by the DPA.

4.2 Fair and Lawful Processing

4.2.1 Fair Processing Code

The DPA requires that before personal data can be processed the following information must be provided to the data subject:

- the identity of the data controller
- the purposes for which personal data are to be processed
- contact details for the purposes of data protection enquiries
- any other information to make the processing fair.

4.2.2 Consent

Personal data will only be shared between the Partners with the consent of the customer. The consent must be informed, specific and fair. Customer Services Advisers will provide a clear explanation of what the customer is consenting to, and the consequences of withholding consent.

4.3 Disclosing Personal Data

- 4.3.1 Partners may decide to disclose personal data to another party in line with this Protocol. Other disclosures of personal data may take place at the request of the customer, or someone authorised to act on their behalf.
- 4.3.2 Disclosures are also permitted under certain circumstances without the consent of the customer. The following are voluntary:
 - For the prevention or detection of crime, the apprehension or prosecution of offenders, or taxation purposes (Section 29(3), DPA)
 - Disclosures made in connection with legal proceedings, for the purpose of obtaining legal advice, or establishing, exercising or defending legal rights (Section 35(2), DPA)
 - Disclosures made for the purpose of safeguarding national security (Section 28(1), DPA)
 - Disclosures made where exemption is by order of the Secretary of State (Section 38(2), DPA)

Reliance on these exemptions must be assessed on a case by case basis, and disclosures should only be made where failure to provide the information would prejudice any of these purposes. All requests and responses must be appropriately authorised and documented.

- 4.3.3 A Partner should not disclose sensitive personal data to anyone other than the data subject, who is entitled to know what information of this nature is held. Any requests concerning such data should be referred to the relevant partner authority's nominated officer.
- 4.3.4 However, there are obligatory circumstances where a Partner should disclose personal data. Specifically, this would be where the disclosure is required by law or by order of a court (Section 35(1), DPA). Again, under this provision, all requests and responses must be appropriately authorised and documented.

4.4 Service Partners, Agents and Contractors

- 4.4.1 For the purposes of Somerset Direct, Partners are acting as data processors for another Partner where they provide services to a customer on their behalf. By agreeing to this Protocol, each Partner accepts that the points listed in paragraph 4.4.2 apply wherever the data controller/data processor relationship exists.
- 4.4.2 This Protocol also allows third party agencies to act as data processors. Partners must take additional measures:
 - There must be a written contract with the third party to cover requirements for the processing, security and sharing of personal data, including the requirement for the third party to act only on instructions given by the Partner.
 - Require the third party to guarantee the security measures they intend to take, and the training they intend to provide for their staff.
 - Limit the flow of information between the Partner and its service provider to the minimum level required for the purpose.
 - Allow the Partner to confirm the adequacy of standards, to respond to any complaints and breaches, and to satisfy data subject access requests.
 - Ensure that service providers do not appoint sub-contractors to carry out the processing without the consent of the Partner, who should audit the sub-contractors' procedures as detailed above prior to the commencement of processing, and on a regular basis during the course of the contract.

4.5 Nomination of Staff

Each Partner's Data Protection Officer will deal with:

• Any issues arising from this Protocol

- Requests for information
- Data protection and security
- Regular audits to ensure procedures set out in this Protocol are being followed.

4.6 Accuracy of Data

- 4.6.1 Each Partner has a responsibility to maintain the accuracy of data processed under this Protocol and to record disclosures.
- 4.6.2 When an inaccuracy is discovered after a disclosure, it is the responsibility of the party discovering the inaccuracy to inform the data controller who should notify all recipients of the correction.

4.7 Retention of Data

Data must not be retained for longer than necessary for the purpose. They must be removed when they are no longer required for the original purpose for which they were supplied or collected.

4.8 Data Subject Access Requests

Individuals have the right of access to a copy of all information held about them, unless an exemption applies where information can be withheld. Partners will adopt common procedures for dealing with subject access requests.

4.9 Security of Data

Each Partner will take all technological and organisational steps necessary to ensure the data are adequately protected.

4.10 Complaints

Any complaint made will be brought to the attention of the nominated officer of the relevant Partner, and dealt with in accordance with their own policies and procedures. Partners will keep each other informed of developments following a complaint received, where relevant.

5. Indemnity

Each Partner will indemnify the other Partners against all losses, costs, expenses, damages, liabilities, demands, claims, actions or proceedings which the other Partners may incur arising out of failure to apply any of the statements or procedures set out in this Protocol.

6. <u>Agreement</u>

The Somerset Direct Partners agree to accept this Protocol and to adopt the standards and procedures contained in it.

PARTNER AUTHORITY	NAME/POSITION	SIGNATURE	DATE
Somerset County Council	A Jones Chief Executive		
Mendip District Council	D Thomson Chief Executive		
Sedgemoor District Council	K Rickards Chief Executive		
South Somerset District Council	P Dolan Chief Executive		
Taunton Deane Borough Council	P James Chief Executive		
West Somerset District Council	T Howes Chief Executive		

Appendix 5 - SSDC Database Audit

Summary of Information

Audit of Databases operated at SSDC undertaken with Heads of Service in July 2007. Information was requested on whether the database is available electronically or in hard copy, whether a guide is available for users and if training is provided or planned to be provided.

Across all service areas 183 returns were generated. A large proportion of these relate to service specific data using either excel spreadsheets or access databases. Training for these "informal" databases is via general IT training and ECDL

Training of users is provided on 100% of databases where data is shared across the organisation. 26 such databases were identified highlighted yellow on the attached list

Training of users is provided on 100% of databases where data is shared outside of the organisation. 9 such databases were identified highlighted in green on the attached list

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Tracy Caller	Established a spreadsheet system for all Welfare Benefits officers to record case information	Yes	No	No	Yes	No
	Tracy Caller	Established a spreadsheet system for Area admin teams and other officers to input and monitor community grants information.	Yes	No	No	Yes (basic excel training)	No
	Tracy Caller	Currently gathering documents for a resource library underpinning the Sustainable Community Strategy – a library/list of pdfs and sources	Yes	No	No	Yes	No
- Assistant Chief Executive	Tracy Caller	Store, contribute to and use existing external databases to extract relevant info i.e. Health and Social Needs Analysis database from Somerset Intelligence Network.	Yes	Yes	Yes	No	No
xec	Julia Dean	Media Monitoring (releases sent, coverage achieved)	Yes	No	No	Yes	Yes
е Ш	Julia Dean	Web contributors across council ICM	Yes	No	Yes	No	No
Chie	Sue Eaton	Trent- HR	Yes	No	Yes	Yes	Yes
nt (Sue Eaton	Gauge- JE	Yes	No	Yes	Yes	No
ista	Sue Eaton	Learning Pool- LMS (not yet set up)	Yes	No	No	No	Yes
Ass	Sue Eaton	BVPI's spreadsheet	Yes	Yes	No	Yes	No
	Sue Eaton	MDP attendees spreadsheet	Yes	Yes	No	Yes	No
Rina Singh	Sue Eaton	Magique Risk Mgt	Yes		Yes	Yes	Yes
a Si	Mike Holliday	Puma	Yes	No	No	Yes	No
Rina	Mike Holliday	Delphi	Yes	No	No	Yes	No
<u>ц</u>	Gary Russ	Lease Cars	Yes	Yes	Yes	Yes	Yes
	Gary Russ	Cheque tracker	Yes	Yes	Yes	Yes	Yes
	Gary Russ	Office supplies	Yes	Yes	Yes	Yes	Yes
	Gary Russ	Annual leave cards	Yes	Yes	Yes	Yes	Yes
	Eleanor Wilson	Northgate Front Office	Yes	No	Yes	Yes	Yes
	Carolyn Price	E-Directory	Yes		Yes		
	Carolyn Price	GroupWise	Yes		Yes	Yes	
	Carolyn Price	GWAVA	Yes		Yes	Yes	
	Carolyn Price	Redline	Yes		Yes		

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Carolyn Price	HEAT	Yes		Yes		Yes
	Carolyn Price	Centennial	Yes		Yes		Yes
	Carolyn Price	СІМ	Yes		Yes	Yes	
	Carolyn Price	Management@net	Yes		Yes	Yes	
	Carolyn Price	ZEN	Yes		Yes	Yes	
	Carolyn Price	SSDC-DB (includes website, iCM)	Yes		Yes (for iCM only)	Yes	Yes
	Carolyn Price	ТІМ	Yes		Yes		
	Carolyn Price	ArcView GIS	Yes		Yes	Yes	Yes
	Carolyn Price	Webmap	Yes		Yes		Yes
	Carolyn Price	Adelante	Yes		Yes		
	Carolyn Price	Gazetteer (part of CAPS Uniform, complies with BS7666))	Yes		Yes	Yes	
	lan Clarke	General "Access" databases dealing with job allocation, job logging, completed agreements, statutory orders and other transactions	Yes		Yes	Yes	Yes
c Serv	lan Clarke	Records of land ownership and transactions that are property bases	Yes	Yes	Yes	Yes	Yes
rati	lan Clarke	Case management system - Solcase	Yes		Yes	Yes	Yes
Democratic Services	lan Clarke	Strand Elections and Electoral Registration – elector details and management of elections.	Yes		Yes	Yes	Yes
lan Clarke Legal & ⊡	lan Clarke	Democratic Services Access Database containing details of members, committees, meetings etc – records which meetings members attend, meeting deadlines, committee admin workloads etc.	Yes	No	No	Yes	Yes
r Clarl	lan Clarke	Minute Database – old pre 1997 database of minutes – rarely used.	Yes	No	No	No	No
laı	lan Clarke	ESRI/Caps Total Land Charges	Yes		Yes	Yes	Yes
	lan Clarke	Caps UniForm system	Yes		Yes	Yes	Yes
la Im sial es	Donna Parham	Cedar – E5 (QSP Financial System)	Yes	No	Yes	Yes	Yes
Donna Parham Financial Services	Donna Parham	Cash Receipting System	Yes	No	Yes	Yes	Yes
Pa Fin Se	Donna Parham	Asset Register	Yes	No	Yes	Yes	Yes

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Donna Parham	Insurance Database	Yes	No	Yes	Yes	Yes
	Donna Parham	32 Day stats (access)	Yes	No	Yes	Yes	Yes
	Donna Parham	Fleetmaster (stores/transport system)	Yes	No	Yes	Yes	Yes
	Donna Parham	Down to Earth (DTE)	Yes	No	Yes	Yes	Yes
Corporate Director Environment	Brian Tufton	Uniform – estates module	Yes	Reports and plans can be supplied	Yes – although would need training 1st	Yes	Only when software is upgraded
onr	Brian Tufton	PSR (property services repairs)	Yes	No	Not required	Yes	Not required
Jvir	Brian Tufton	Contractors List	Yes	Yes	No	Yes	Not required
ш с	Brian Tufton	IPF property condition surveys	Yes	No	Yes	Yes	Not required
cto	Brian Tufton	Car Park management	Yes	No	Yes	Yes	Not required
Dire	Brian Tufton	Property register (Excel)	Yes	No	N/a	N/a	N/a
te	Brian Tufton	Energy management (excel)	Yes	No	N/a	N/a	N/a
ora	Brian Tufton	Security records (excel)	Yes	No	N/a	N/a	N/a
orp	Brian Tufton	Sickness and leave (excel)	Yes	No	N/a	N/a	N/a
0	Chris Cooper	ESG ORACLE	Yes	No	No	Yes	No
SSS	Chris Cooper	ESG BIN ORACLE	Yes	No	No	Yes	No
Sturgess	Chris Cooper	SICKNESS DATABASE	Yes	No	Yes	Yes	No
StL	Chris Cooper	STRAY DOG DATABASE	Yes	Yes	No	Yes	No
Vega	Chris Cooper	FLY CAPTURE	Yes	No	No	No	No
Ve	Chris Cooper	LAND PLOT DATA SYSTEM	Yes	No	No	Yes	Yes
	Chris Cooper	ENFORCEMENT ORACLE	Yes	No	No	Yes	Yes
	Chris Cooper	FLEETMASTER	Yes	No	Yes	Yes	Yes
ר ר tor	Janet Roberts	Welfare Benefits Case Spreadsheet	Yes				Yes
etor irec Vell	Janet Roberts	Contacts Database (access database)	Yes				
	Janet Roberts	Anite	Yes			Yes	
I St Ith Bei	Janet Roberts	Domus	Yes			Yes	
avic rpo Hea	Janet Roberts	CORE	Yes		Yes		
David Stapleton - Corporate Director Health & Well- Being	Janet Roberts	Appeals Spreadsheet	Yes			Yes	

ate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Janet Roberts	Nominations	Yes			Yes	
	Janet Roberts	Applications Received Spreadsheet	Yes			Yes	
	Janet Roberts	Deposit Progress Book (pre Mar 07)	Yes		Yes	Yes	
	Janet Roberts	Deposits & Rent in Advance Book	Yes		Yes	Yes	
	Janet Roberts	Deposits, RIA & STS Backlog (spreadsheets)	Yes				
	Janet Roberts	Spend to Save Prevention Fund (revised)	Yes		Yes	Yes	
	Janet Roberts	Legal Files & Aged Debt	Yes				Yes
	Janet Roberts	Prevention Sheets	Yes		Yes	Yes	
	Janet Roberts	Removals & Storage Records	Yes			Yes	
	Janet Roberts	Triage Progress Book	Yes			Yes	
	Janet Roberts	Visitor Log	Yes			Yes	
	Janet Roberts	Post Tracking Form	Yes			Yes	
	Janet Roberts	Phone Log	Yes			Yes	
	Janet Roberts	Travel Sheet (Admin)	Yes			Yes	
,	Shirley Courage	Civica APP (Flare) Environmental Health database	Yes		Yes (suppliers support package)	Yes	Yes
	Shirley Courage	Foundation (Archive read only) (Home Aid)	Yes		Yes	Yes	
	Shirley Courage	Femis (web based database supported by Foundation) (Home Aid)	Yes		Yes	Yes	No
	Shirley Courage	Envisage (Former EH database used for archived information)	Yes		Yes	Yes	
1	Shirley Courage	Trading Estate Occupiers (MS Word) (held by Bob Killick, Health & Safety Officer)		Yes	No	No	No
,	Shirley Courage	Croners Hazardous Substances Guide		Yes	No	No	No
1	Shirley Courage	Regalion (on-line licensing) to be implemented shortly	Yes		Yes (suppliers support package)	Yes	Yes
	Shirley Courage	Accident Records Access Database (held by Tony Richbell, Safety Advisor)	Yes		No	Yes	No

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Shirley Courage	Property Access Database (held by Tony Richbell, Safety Advisor)	Yes		No	Yes	No
	Shirley Courage	Contractors Access Database (held by Tony Richbell, Safety Advisor)	Yes		No	Yes	No
	Shirley Courage	New Starters Induction Access Database (held by Tony Richbell, Safety Advisor)	Yes		No	Yes	No
	Shirley Courage	Groundview Software (Contaminated Land)	Yes		Yes (suppliers support package)	Yes	No
	Shirley Courage	Approved Food Premises (excel – pass worded held by Nigel O'Grady). This will be superseded later in the year by a database held by the FSA and accessed via the web.	Yes		No	No	No
	Shirley Courage	Houses of Multiple Occupation (HMO's)	Yes		No	v	No
	Shirley Courage	Environmental Protection hold lots of other data in various formats - PPC public register (hard copy), GIS mapping of con land, PWS, PPC etc, Spreadsheets of land fill gas data etc, but they're not databases (depending on the interpretation of database)					
	Shirley Courage	Licensing Information (depending on interpretation of Database) Excel: Motor Salvage Operators Register Scrap Metal Dealers Register Boarding Register Breeding Register Dangerous Wild Animal Register Pet Shop Register Riding Establishments Register Word Cooling Tower Register (also on web)					

		Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing	
Dav	vid Julian	Tourism Contacts Database – includes various fields and categories	Yes	No	No	Yes, by IS dept	ongoing
		Parish Path Footpath Representatives	Yes	No	No	Yes	Yes
Dav	vid Julian	Residential addresses for countryside events	Yes	No	No	Yes	Yes
Dav	vid Julian	Friends of Ham Hill Database	Yes	No	No	Yes	Yes
Dav	vid Julian	Addresses/insurance/contact					
Dav	vid Julian	Yeovil Country Park Volunteers	Yes	No	No	Yes	Yes
Dav	vid Julian	Addresses/insurance/contact					
Dav	vid Julian	Ham Hill Country Park Volunteers Addresses/insurance/contact	Yes	No	No	Yes	Yes
Dav	vid Julian	Look Out Club (Childrens club) Addresses for event notification	Yes	No	No	Yes	Yes
Mu	iseum	Modes (Lists all the objects in the Museums' collection)	Yes		Yes	Externally	
Mu	iseum	Pub Projects in Microsoft Access	Yes				
Ali	Cameron	A to Z Sports Club Directory	Yes (excel)	Yes	No	Yes	No
Ali	Cameron	Sports coaching courses e.g street soccer, trampolining, Startrack	Yes (excel /access)	Yes (copies of booking forms)	No	Yes	No
Ali	Cameron	Artemis (sports facility bookings)	Yes	No	Yes	Yes	Yes
Ali	Cameron	Yeovil Sports Ground Users	Yes (access)	Yes	No	Yes	No
Ali	Cameron	Athletics Season Ticket holders	Yes (word)	Yes	No	Yes	No
Ali Cameron Passport to Leisure		Passport to Leisure	Yes (access)	Yes (copies of application forms)	No	Yes	No
Ali	Cameron	Hirers of equipment/ minibus at Resource Centre - individuals	Yes (access)	Yes (copies of application forms)	No	Yes	No
Ali	Cameron	ACT database (Hirers of equipment/ minibus at Resource Centre – groups)	Yes	Yes (copies of application forms)	No	Yes	No

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Ali Cameron	ProActive referral scheme	Yes (access)	Yes (copies of clients' records)	Yes	Yes	Yes
	Ali Cameron	Flexercise course	Yes (excel)	Yes (copies of application forms)	Yes	Yes	No
	Ali Cameron	Health walk leaders course	Yes (word)	Yes (held centrally)	Yes	Yes	No
	Ali Cameron	Haven (Goldenstones membership, swim school, courses etc)	Yes	Yes (copies of users' records)	Yes	Yes	Yes
	Ali Cameron	Direct debit members	Yes (excel)	Yes (copies of users' records)	Yes	Yes	No
	Ali Cameron	Annual survey information	Yes (excel)	No	Yes	Yes	No
	Ali Cameron	Patronedge (provided by Blackbaud) – Octagon ticket sales, Footlight members, holiday activities etc)	Yes	No	Yes	Yes	Yes
	Ali Cameron	Crest (previous Octagon booking system, kept for archive)	Yes	No	Yes	No	No
	Ali Cameron	Play area provider quarterly inspections	Yes (excel)	No	No	Yes	No
	Pat Colgan	SX3/Northgate Revenues & Benefits	Yes		Yes	Yes	Yes
ate	Pat Colgan	Comino EDM	Yes		Yes	Yes	Yes
Vita	Pat Colgan	Civica Business Rates	Yes		Yes	Yes	Yes
lic j	v	Northgate Customer First	Yes		Yes	Yes	Yes
) -) Nor	Pat Colgan	Cedar Financials (QSP)	Yes		Yes	Yes	Yes
	Pat Colgan	Aspiren (National Performance Monitoring Framework)	Yes		Yes	Yes	Yes
Doll Dr E	Pat Colgan	Bankers Automated Clearing Service (BACS-IP Gateway)	Yes		Yes	Yes	Yes
Mark Pollock - Corporate Director Economic Vitality	Pat Colgan	CIS – DWP Customer Information System	Yes		Yes	Yes	Yes
Dire	Pat Colgan	Training Needs Analysis	Yes		Yes	Yes	Yes
	Pat Colgan	ACS Procedures Manual System	Yes		Yes	Yes	Yes

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Pat Colgan	Business Rate Inspections Void Cards		Yes	Yes (Written Procedures in Place)	Yes	Yes
	Pat Colgan	Council Tax Inspections (Spreadsheet)	Yes		Yes	Yes	Yes
	Pat Colgan	Tenancy Changes From South Somerset Homes		Yes	Yes (Processes in place)	Yes	Yes
	Pat Colgan	VICTER		Yes			
	Pat Colgan	Register Of Electors (Spreadsheet)			Yes (Written Procedures in place)	Yes	Yes
	Andy Foyne	Top 500 Businesses	Yes	Yes	no	no	Simple database – training not necessary
	Andy Foyne	Top 100 South Somerset Businesses	Yes	Yes	no	no	Simple database – training not necessary
	Andy Foyne	Business Directory	Yes	No	No	Yes	No (operator already trained)
	Andy Foyne	Bus operators	Yes	Yes	No	No	Simple database – training not necessary
	Andy Foyne	Local Plan Consultees	Yes	Yes	Yes	Yes	Yes
	Andy Foyne	Housing development and land available	Yes	Yes	No	Yes	Yes
	Andy Foyne	Employment land available	Yes	Yes	No	No	Yes
	Andy Foyne	Water mill owners	No	Yes	No	No	No
	Simon Gale	Complaints	Yes		Yes	Yes	
	Simon Gale	Uniform	Yes		Yes	Yes	

ectorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
	Simon Gale	Comino	Yes		Yes	Yes	
	Simon Gale	Microfiche		Yes			
	Area South	Regeneration Database	Yes			Yes	
	Area South	Wider Regeneration Area database	Yes			Yes	
	Area South Princes Street Improvements		Yes			Yes	
	Area South	Westfield Planning for Real Stakeholders	Yes			Yes	
	Area South	Area South village halls	Yes			Yes	
	Area South	Markets stallholders	Yes	Yes		Yes	
	Area South	Community Grants	Yes			Yes	Yes
	Area South	Shopfront Grants	Yes	Yes		Yes	
	Area South	Yeovil Town Centre Partnership Members	Yes	Yes		Yes	
	Area South	Yeovil Town Centre Retailers & Businesses	Yes			Yes	
	Area West	Area West Grants (excel)	Yes				
	Area West	MTIG Scheme (excel)	Yes				
	Area West	MTV base data (excel)	Yes				
		Keinton Mandeville Parish Plan Monitoring (a trial spreadsheet other parishes to follow and combined spreadsheet for all parishes still 'under construction')	Yes			Yes	
	Area East	Community Grants Recording (on Hector shared drive)	Yes			Yes	
	Area East	Northgate (Customers First) – NOT originated from AE	Yes		Yes	Yes	
	Area East	SCS Evidence Base Contents List	Yes				
	Area East	SSDC Baseline Indicators (LDF)	Yes				
	Area East	Footfall/enquiry figures	Yes (monthly)	Yes (weekly)		Yes	
	Area East	Parish & Community Plan Audit	Yes				Yes
	Area North	Uniform – Building Control	Yes		Yes	Yes	
	Area North	Flare – Environmental Protection	Yes		Yes	Yes	Yes
	Area North	Northgate – Customer Services	Yes		Yes	Yes	Yes
	Area North	Land charge database in Excel for Environmental Services	Yes			Yes	Yes
	Area North	Grants database in Excel	Yes		Guidance issued by Alice Knight	Yes	

Directorate	Team / Area	Database	Electronic	Hardcopy	User Guide available	Training of User given	Training Planned/ ongoing
		Ad hoc databases in Excel mostly for mail merges and maintaining contact details, eg Parishes, Clubs, Over 50 details	Yes			Yes	
	Area North	[Comino Electronic Document Management for Planning and Benefits]	Yes		Yes	Yes	

Appendix 6 - Data Quality Action Plan

Page No		Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	ity Agreed Comments		Date	Progress to date
9	R1	Ensure that councillors receive appropriate training on data quality and information management and clarify responsibilities for overall data quality at member level.	2	Head of Legal & Democratic Services		Training/guidance will be included in the Member Induction Programme (following the production of the Data Quality Strategy)	May 08	
9	R2	Develop a clearer and consistent corporate approach by adopting corporate objectives for information management and set data quality objectives for all relevant services.	3	ACE (Data Quality Strategy) Head of Legal & Democratic Services (links to information management) MB – setting Data Quality objectives for services		We will develop a Data Quality Strategy, which will outline our information management objectives. In addition, data quality objectives will be included in individual service plans	Sept 07	Final draft to be presented to Management Board week commencing 11 th July 07, after which links to information management and setting of objectives for services will follow
9	R3	Clarify whether staff understand and follow data quality policies and procedures and apply them consistently throughout the organisation.	2	Head of Legal and Democratic Services		This will be explored once the Data Quality Strategy has been produced. Procedural notes will be disseminated through InSite (Council's intranet site)	Nov 07	

Page No		Recommendation		Responsibility	Agreed	Comments	Date	Progress to date
9	R4	Ensure that staff are clear about the quality of performance data that they are expected to aim for.	2	ACE		Again, this will be disseminated to all staff through InSite and through procedure notes	Nov 07	
9	R5	Demonstrate that data on groups of citizens that may be harder to reach is being used to develop and improve services	2	MB MP/AG		Ensure service (usage and other) data on Hard to Reach groups is collected by services and analysis fed into service plans 	October 07	
9	R6	The Council should implement quality control arrangements to confirm the accuracy of data input into statutory housing returns	2	Corporate Director – Health & Well-being		Head of Service to put a system in place to ensure the accuracy of data which is submitted	March 07	HoS for Housing on long term sick. Another HoS seconded to the service who has been tasked with working on it.
9	R7	The Council should ensure that systems are implemented, which provide reasonable assurance that the recycling data provided by ECT is accurate	3	Corporate Director - Environment		Head of Service to ensure robust systems are in place and implemented	March 07	Audited by Beth Prince, March 07 and signed off.

Page No	Recommendation		Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date	Progress to date
9	R8	The Council should ensure that can provide adequate working papers to support the calculation of this BVPI. In addition these working papers should be supported by verifiable system documentation	3	ACE	DP MB	Performance Team to co-ordinate and liaise with SWAP on the quality of the documentation. BVPIs will be subject to internal audit Directors and Head of Service to ensure that adequate working papers, together with verifiable system documentation are provided as part of the annual end of year BVPI returns.	March 07	In place In place In place